



Stakeholder Implementation Advisory Committee Meeting  
November 29, 2017  
Time: 10:00 AM – 3:00 PM  
**MEETING MINUTES**

**Purpose:** Obtain input and recommendations on policy, best practices, and other aspects of CCR implementation.

Agenda Item	Notes/Discussion	Action Item
<b>I. Welcome and Introductions</b>  Theresa Thurmond, CCR Manager, Stakeholder Engagement and Communication  Sara Rogers, CCR Branch Chief  <b>Opening remarks</b> Will Lightbourne, Director, CDSS  <b>Previous Meeting and Agenda Summary</b>	<ul style="list-style-type: none"> <li>The CANS assessment tool has been adopted.</li> <li>The majority of Group homes were extended into 2017 and RFA is being implemented statewide.</li> <li>The first two years of the roll-out for CCR are seminal to its development and success. 200 FFAs have had their program statements reviewed and 61 potential Short-Term Residential Therapeutic Program (STRTP) have been approved representing 1000 beds. The first phase of the new rate has been rolled out and the work on phase II is complete.</li> <li>The CDSS is working on developing recruitment for homes willing to work with teens. The critical items in process include the fact that non-STRTPs are “going to wind down.” The CDSS is working with each county to find and plan for youth that will be leaving non-STRTPs. Some may go into transitional housing. The timeliness of RFA approvals are a challenge. There is a lot of cross systems work trying to get this done. Counties are transitioning shelter care to temporary shelters. There is a strong focus on being flexible to be able to deal with unintended consequences</li> </ul>	None.
<b>II. CCR Updates</b>  Theresa Thurmond, CCR Manager, Stakeholder Engagement	The CCR infographic, The Promise of Continuum of Care Reform Stakeholders was provided as a handout and attendees were encouraged to write to the CCR email box for the electronic version to distribute at the local level.	None.

<p><b>Glenn Tsang, CCR Manager, Policy and Regulation Development</b></p>	<ul style="list-style-type: none"> <li>• Temporary shelter care: The State has received and are reviewing nine transition plans.</li> <li>• The State has bi-weekly technical assistance calls with counties.</li> <li>• There are now 18 licensed STRTP providers representing a total of 61 individual facilities. A number of STRTP applications are currently in review.</li> <li>• Intensive Services Foster Care (IFSC) has been approved and implemented.</li> <li>• Regional Centers and counties have a workgroup with the goal of creating greater collaboration to discuss best practice and review service models.</li> <li>• The Policy Unit is also providing Sexual Orientation Gender Identity Expression (SOGIE) trainings.</li> <li>• The Policy Unit is in the process of hiring new staff.</li> </ul>	
<p><b>Sara Rogers, CCR Branch Chief, on behalf of Rami Chand, Manager, Program and Services Implementation</b></p>	<p>The CDSS has contracted with Dr. Denise Goodman, a nationally recognized expert in resource parent recruitment and retention. She is working with five pilot counties with the goal of finding families for specific children who have been hard to place. This process also taps into Quality Parenting Initiative (QPI). This unit will be focused on the communication of meeting CCR goals and continuing education and on providing direction on how we better serve children. They are also looking at expanding the “ladder of engagement” to develop a greater support network for children and youth.</p>	
<p><b>Daisy Braxton on behalf of Cheryl Treadwell, Branch Chief, Foster Care Audits and Rates Branch (FCARB)</b></p>	<p>The Level of Care (LOC) protocol has been created. Foster Care Audits and Rates Branch (FCARB) has been working on a couple of All County Letters (ACLs) regarding the recent delayed implementation and there should be two more rate related ACLs released this month, including one about ISFC. There will also be an ACL focused on the Home-Based Care rate protocol (including a matrix and scoring sheet), as well as an ACL about Special Care Increments (SCIs). The funding for SCIs was realigned in 2011, so there are no federal funds in SCI monies. CDSS is</p>	

<p><b>Kendra Elmendorf, Manager, Resource Family Approval Implementation</b></p>	<p>developing guidelines regarding SCI and the new rates. A Group Home extension is also being developed.</p> <p>Resource Family Approval (RFA) policies are being reexamined to see how to make the approval process more efficient and timely for relatives and Non-Related Extended Family Members (NREFMs). The next version of the Written Directives will be released in early 2018. The RFA Unit is working on putting together trainings for county social workers on psychosocial assessments and written reports. They are also working on webinars that will be available on the RFA website regarding a number of specific topics. All County Information Notices (ACINs) and All County Letters (ACLs) are being developed to share information on new policies and how to streamline the RFA process. An ACIN on the out-of-county approval protocol will be released soon. There was a statute change in AB 404 which allows caregivers who provided respite care in calendar year 2017 to qualify for conversion to RFA.</p>	
<p><b>Wendy Cook, Manager, Technical Assistance and Oversight</b></p>	<p>The Technical Assistance and Oversight Unit is a new unit in the CCR Branch (that co-manages 12 county liaisons with CCL County Foster Family Home and Resource Family Approval Programs Unit) regarding RFA approval. The units conduct monthly legal consultations with counties which include discussions about denials, rescissions, and due process. Quarterly technical assistance meetings regarding RFA are held for supervisors and line staff which can include a Q&amp;A, guest speakers, input from Fire Marshals, and supplemental trainings. The units will also be conducting RFA annual reviews for all 58 counties in 2018. There are currently six regionally based positions for these two units to be staffed.</p>	
<p><b>Marisa Sanchez, Manager, CCL Policy Development</b></p>	<p>CCL is involved with all parts of the CCR/RFA development. They are working with FFAs regarding the challenges being faced with caregiver background checks. CCL will be releasing a Provider Information Notice (PIN) that has an FAQ and addresses clearances, ORI numbers, and applicant types. They are also still working on Plan of Operation and</p>	

<p><b>Renzo Bernales, Department of Education</b></p>	<p>Program Statement reviews and offering technical assistance and guidance on revisions.</p> <p>The CDSS provided a CCR training with the Foster Youth Services Program of the California Department of Education (CDE). Foster Youth Services Coordinating Programs (FYSCP) are being encouraged to work with child welfare CCR efforts. Two of the foci are transportation and support services. The CDE is working on tracking student achievement data for foster youth on the California dashboard. The dashboard includes a graphic representation of data from a state-wide level down to individual schools as the website provides a search function. The dashboard reports are found at <a href="https://www.caschooldashboard.org/#/Home">https://www.caschooldashboard.org/#/Home</a>. The dashboard includes information on absenteeism and information for student sub-groups that are included in the Local Control Funding Formula which includes foster youth. The information provided through the dashboard could be helpful for the Child and Family Team meetings (CFT). There is an education specific workgroup, from the larger CCR state/county implementation workgroup, that has focused on CFTs. This workgroup has assisted on the development of an educational toolkit to provide information on CFTs.</p>	
<p><b>Anetria Turner, Manager, Performance and Transparency</b></p>	<p>This unit is focused on a provider performance dashboard and is currently looking into information being tracked regarding youth outcomes in seven domains: safety, permanency, social connections, mental health, life skills, and consumer satisfaction. The hope is to have the dashboard up and running by the Fall of 2018. A youth satisfaction survey is being developed in a joint effort with the Ombudsman's Office which will ensure that the youth's rights are being met. This unit will be providing quarterly report to the State Legislature as well as a quarterly county profile on youth in congregate care.</p>	
<p><b>Teresa Castillo, Manager, Department of Health Care Services (DHCS)</b></p>	<p>The Department of Health Care Services (DHCS) and the CDSS are drafting additional information notices which will provide further information regarding presumptive transfer. The Medi-Cal Manual for</p>	

	Intensive Care Coordination, Intensive Home Based Services, and Therapeutic Foster Care (TFC) is being updated to include information on TFC. The DHCS anticipates releasing the manual in late December 2017. The DHCS is also in the process of releasing additional information on STRTP mental health program approval process in January 2018.	
<b>Integrated Core Practice Model, Training Guide and Interagency MOU – Breakout Session</b>	<p>Richard Knecht, Integrated Services Advisor, presented on the state's efforts to both build system wide CCR reforms on prior reform efforts under early System of Care work, Katie A., Wraparound, Mental Health Services Act (MHSA), and other change initiatives, and also to provide attendees with exposure to the critical anchoring documents which are intended to sustain the implementation of CCR and related reforms going forward.</p> <p>The breakout session discussed the strengths and challenges of the California Youth and Family Integrated Training Guide, California's Integrated Core Practice Model (ICPM), and the county Interagency Memorandum of Understanding (ITG) and how providers, service recipients, and other stakeholders can support state and county partners in implementation of these three tools and the reforms they support. Feedback from breakout session included:</p> <ul style="list-style-type: none"> <li>• Most participants felt that the ICPM and ITG represent a positive cultural shift and a strength-based process. Participants feel that the documents reflect that Wraparound is now “coming to life.” One participant stated “that they like that it is focused on building relationships and honoring families without negating roles/laws.”</li> <li>• Among the concerns identified included a suggestion to provide more concrete examples on how professionals can be more authentically engaging.</li> <li>• A universal concern is that it may be challenging to actionize the ICPM. Participants would like to see more examples as to how it is put into practice rather than “just being words.”</li> </ul>	None.

	<ul style="list-style-type: none"> <li>• Some participants would like to have the word, “permanency” defined as there are various ways to define the word permanency.</li> <li>• Providers expressed a desire to have the ICPM inform and apply to their agencies. Providers would like to have counties be more open to what providers are experiencing as well as being more open to feedback from providers. Providers expressed a hope that county agencies would engage providers in a more collaborative and partner based manner. Administration should be a model for the way they want providers/staff to work with children.</li> <li>• It was expressed that “Case Plans” should be integrated and there should be one case plan for dual status youth.</li> <li>• Shared training is critical for providers and counties to be on the same page.</li> </ul>	
<b>III. CANS/CFT Implementation</b>	<p>Child and Adolescent Needs and Strengths (CANS) is the assessment choice of both the CDSS and DHCS. The CANS completion is to be viewed as a process rather than an event. The goal of the CANS tool will assure that no youth or family experiences multiple CANS or functional assessments. There will only be one CANS assessment per family. While there will be some county flexibility, generally, Mental health can complete the assessment and it can be used in a collaborative manner to drive the treatment and service planning. The CDSS’ goal is to create and support a delivery model for a CFT facilitator who will be responsible to complete or assure completion of a shared, single CANS. This goal would be to ensure that the CANS is completed in a timely manner as part of the CFT process so that it can inform the final case plan. Policy and tools are currently being developed regarding the facilitator and the CFT. The CDSS is working on a Request for Information (RFI) to identify potential providers for regional or state-wide pool of providers for CFT/CANS service delivery and care coordination.</p>	

**Next Meeting:**

**Date:** Thursday, March 1, 2018

**Time:** 10:00 AM – 3:00 PM

**Location:** CDSS Auditorium